1411522



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR ORM LIMITED OFFERING EXEMPTI

OMB APPROVAL								
OMB Number:	3235-0076							
Expires:								
Estimated average	e burden							

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hours per response...

UNIFORM LIMITED OFFERING EXEM	PTION L
Name of Offering Check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply):	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	07076693
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	·
First State Acquisition Partners, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
280East Main Street, Suite 108, Newark, DE 19711	302-356-1599
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
	PROCESSED
E the base of the Armed	olease specify): SEP 1 0 2007
Actual or Estimated Date of Incorporation or Organization: OT	
GENERAL INSTRUCTIONS	· · · · · · · · · · · · · · · · · · ·
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 6 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only reporthereto, the information requested in Part C, and any material changes from the information previously supplied to the filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

A. BASIC	IDENTIFICATION DATA		
2. Enter the information requested for the following:			
Each promoter of the issuer, if the issuer has been organize	ed within the past five years;		
Each beneficial owner having the power to vote or dispose, or dispose, or dispose, or dispose, or dispose, or dispose and dispose are disposed.	or direct the vote or disposition	of, 10% or more of a	class of equity securities of the issuer.
Each executive officer and director of corporate issuers an	d of corporate general and ma	naging partners of p	artnership issuers; and
Each general and managing partner of partnership issuers.			
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Little, Mark		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Number and Street, City, State, Zi 280 East Main Street, Suite 108, Newark, DE 19711	ip Code)		
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Brown, Michael B.			
Business or Residence Address (Number and Street, City, State, Zi 280 East Main Street, Suite 108, Newark, DE 19711	p Code)		
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		- 1000	
Business or Residence Address (Number and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zi	p Code)	 :-	
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	· · ·		
Business or Residence Address (Number and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zi	p Code)	. .	
(Use blank sheet, or copy and	use additional copies of this s	sheet, as necessary)	

					B. 13	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No x	
••	tius tiic	133401 301	2, 01 4 0 6 3 ti			Appendix						٠	<u>(=</u>
2.	What is the minimum investment that will be accepted from any individual?											\$_ 75 ,	00.00
											Yes	No	
3.	Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any												K
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	Full Name (Last name first, if individual) N/A												
		Residence	Address (N	lumber and	l Street, C	ity, State, Z	Zip Code)		.				
											_		
Nai	ne of As:	sociated Bi	roker or De	aler									
Sta			Listed Has										-
	(Check	"All States	s" or check	individual	States)			***************************************		****************		☐ AI	l States
	AL IL	[AK]	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	Full Name (Last name first, if individual)												
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				•		
Nar	ne of As	sociated Br	oker or De	aler		,					-		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)				•••••	***************************************		☐ Al	l States
	AL	AK	ΑŽ	AR	CA	CO	CT	DE			GA	HI	ID
	MT	NE	IA NV	KS NH	KY NJ	LA) NM	ME NY	MD NC	MA ND	MI) OH)	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity. State.	Zin Code)						
_			(1										
Nar	ne of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)						•••••	☐ AI	I States
	AL	AK	AZ	ÄŘ	CA	CO	CT	DE	DC	FL.	GA NOT	HI	
	IL MT	IN NE	NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ł.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		_	c
	Debt		
	Equity)	\$
	Common Preferred		
	Convertible Securities (including warrants)		\$ \$ 500,000.00
	Partnership Interests		- *
	Other (Specify)	500,000,00	
	Total	500,000.00	\$ 500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 500,000.00
	Non-accredited Investors		*
	Total (for filings under Rule 504 only)		\$ 500,000.00
		<u> </u>	<u> </u>
_	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		s
	Legal Fees		s
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	
	Other Expenses (identify)	- -	\$
	Total		\$ 0.00

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		\$
5 .	Indicate below the amount of the adjusted gross proce each of the purposes shown. If the amount for any p check the box to the left of the estimate. The total of th proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and ne payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	\$
	Purchase of real estate		\$	\$
	Purchase, rental or leasing and installation of machinand equipment	nery] \$	<u> </u>
	Construction or leasing of plant buildings and facilit	ties	\$	<u></u> \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securities of another	¬\$	☑ \$ ^{500,000.00}
	Repayment of indebtedness			
	Working capital			
	Other (specify):			
	Column Totals			
	Total Payments Listed (column totals added)	_	- - ·	0,000.00
		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the un nature constitutes an undertaking by the issuer to furnis information furnished by the issuer to any non-accred	sh to the U.S. Securities and Exchange Commiss	sion, upon writte	le 505, the following n request of its staff,
SS	uer (Print or Type)	grature 1 1	Date da alan	
Fir	rst State Acquisition Partners, LLC	1/lad a low	8/23/07	
Va:	me of Signer (Print or Type)	Fitle of Signer (Print or Type)		
laı	rk Little	Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNAT	TURE			
1.	Is any party described in 17 CFR 230.262 presonant provisions of such rule?				Yes	No ⊠
	See A	prendix, Column 5, for	state response.			
2.	The undersigned issuer hereby undertakes to furn D (17 CFR 239.500) at such times as required		strator of any state in w	nich this notice is f	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to fu issuer to offerees.	rnish to the state admir	nistrators, upon writter	request, informat	ion furn	ished by the
4.	The undersigned issuer represents that the issue limited Offering Exemption (ULOE) of the state of this exemption has the burden of establishing	e in which this notice is	filed and understands			
	per has read this notification and knows the content thorized person.	s to be true and has duly	caused this notice to be	signed on its beha	lf by the	undersigned
,	Print or Type) ate Acquisition Partners, LLC	Signature,	Total	Date 8/23/0	7	
		Title (Print or Type)	1000	-1 -1		

Manager

Mark Little

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate offering price Type of investor and amount purchased in State explanation of to non-accredited waiver granted) investors in State offered in state (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Investors Amount Yes No Yes Investors Amount No State AL ΑK AZAR CA CO CT 0 \$0.00 X DE Psp Int. - 300,000 DC FL GA НІ ID IL IN ΙA KS KY LA ME MD MA ΜI MN MS

APPENDIX ì 2 3 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell offering price explanation of Type of investor and to non-accredited waiver granted) amount purchased in State investors in State offered in state (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Amount State Yes No Investors Amount **Investors** Yes No MO MT NE NV NH NJ NM NY NC ND ОН OK OR psp. int. - 300,000 \$150,000.0 PA 2 \$0.00 X RI SC SD TN TX UT VT VAWAWVWI

	APPENDIX											
1		2	3 Type of security			5 Disqualification under State ULG						
	to non-a investor	to sell ccredited s in State l-Item 1)	and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				(if yes, attacl explanation of waiver granto (Part E-Item				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												

END